

Overview and Introduction to Maryland Home Visiting Services (HVS) Pilot Opportunity

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Webinar Objective

The objective of this webinar is to help stakeholders contemplate and assess their interest in and readiness for applying for or participating in the HVS Pilot.



§1115 HealthChoice Waiver Renewal

- Effective January 1, 2017, CMS approved and renewed waiver for 5 years through 2021.
- Current Renewal: 2017 renewal period is focused on developing cost effective services that target the significant, complex health needs of individuals enrolled in Medicaid including:
- Expanding services through Community Health Pilots:
 - Assistance in Community Integration Services (ACIS) (pending)
 - Evidence-Based Home Visiting for High Risk Pregnant Women and Children up to Age Two (HVS)



Community Health Pilots - (Eff. Date: 7/1/2017) Key Aspects:

- Developed in response to local jurisdiction requests for a funding path.
- Local health departments or other local government entities, such as a local management board, are eligible to apply and serve as Lead Entities.
- There is no DHMH funding contribution.
- To access federal funds Lead Entities must be able to:
 - fund non-federal share with local dollars; and
 - process an intergovernmental transfer (IGT) of funds.
- Stakeholder groups have been briefed.
- The Community Health Pilots include an evaluation component.



§1115 Waiver Renewal Initiatives

Evidence-Based Home Visiting for Pregnant Women and Children Up to Age 2 Pilot

- Home visiting services (HVS) for high-risk pregnant women and children up to age 2.
- Must be Medicaid beneficiaries to participate.
- Programs that may be offered: Nurse Family Partnership and Healthy Families America.
- HVS Pilots are funded separately and distinctly from federally funded programs (e.g. MIECHV).

Current Maryland
Evidence-Based
Home Visiting
Programs (HFA
and NFP*) by
Jurisdiction

Jurisdiction	Agency	Current Status
Allegany	Health Department	Affiliated
Baltimore County	Health Department	Accredited
Baltimore City*	Family League	Accredited
Calvert County	Public Schools	Accredited
Charles County	Center for Children	Accredited
Dorchester	Health Department	Accredited
Frederick	Mental Health Association	Accredited
Garrett	Health Department	Accredited
Harford	Health Department	Affiliated
Howard	Howard General Hospital	Accredited
Lower Shore (Somerset)	Eastern Psych Association	Accredited
Mid Shore	Health Department	Accredited
Montgomery	Family Services	Accredited
Prince George's	Dept. Family Services	2 Sites Accredited; 1 site Affiliated
Washington	Health Department	Accredited
Wicomico	Health Department	Accredited



Pilots By The Numbers

Assistance in Community Integration Services (annual funds)

\$2.4 M Total

\$1.2 M Matching Federal Dollars Available

Home Visiting Pilots (annual funds)

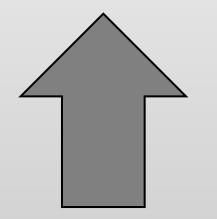
\$5.4 M Total

\$2.7 M Matching Federal Available

Timeline of 4.5 Years



Pilot Goals



- To improve health outcomes for targeted populations.
- To improve community integration for at-risk Medicaid beneficiaries.

• To reduce unnecessary/inappropriate utilization of emergency health services.



Lead Entities

Type Allowed:

- A county or Baltimore City government
- A local health department
- A local management board
- A federally recognized tribe
- A tribal health program under a Public Law 93-638 contract with the federal Indian Health Services

Responsibilities:

- Submits Letter of Intent and application
- Serves as the organizing hub and contact point for the pilot
- Primary link to DHMH.
- Collaborates with participating entities
- Facilitates financial arrangement and payment with participating entities



Participating Entities

Type Allowed:

- Managed Care Organizations
- Health services agency/department
- Specialty mental health agency
- Community based organizations
- Private contractors

Responsibilities:

- Collaborates with the lead entity to design and implement the pilot
- Provides a letter of commitment
- Service delivery
- Contributes to data sharing/reporting



Key Pilot Project Activities

- Pilot must identify and define its target population.
- Pilot should prioritize its highest risk population to engage.
- Pilot must coordinate with beneficiaries' MCOs.
- Beneficiary participation in pilot is voluntary.
- Pilot must report performance and outcome measures.
- Requires local oversight and funding commitment.



Pilot award payments shall support:

- Services not otherwise covered or directly reimbursed by Maryland Medicaid to improve care for the target population;
- Expanded service delivery opportunities;
- Direct provision of services only;
- And will require Medicaid recipient PII/PHI level reporting to receive funding.



Funding Mechanism

- The Lead Entity is required to provide the full financial share of non-federal payment.
 - Lead Entity share cannot be from a federal funding source (for example, MIECHV).
- There is <u>no</u> DHMH funding contribution.
- Local funds cannot be supplanted or offset.
- Lead Entities will be required to derive a rate per unit of services provided

Funding Flow for Federal Match

Lead Entity contributes local share of pilot project funding

Intergovernmental Transfer (IGT)

DHMH draws down matching federal funds

Lead Entity receives pilot project funding

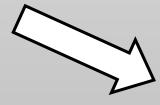
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Payment

Using both local and federal dollars, DHMH disburses pilot project funds to Lead Entity





Lead Entity provides services "inhouse;" accounts for direct service expenditures on Budget Form 4542

Lead Entity pays Participating Entity retrospectively for services delivered; accounts on Budget form 4542

Funding Process

- Funds transactions will be governed by the Local Health Department Funding System Manual.
- Requires Lead Entity submission of line item DHMH budget.
- Requires submission of service invoice provided at the Medicaid beneficiary level including at the minimum:
 - Beneficiary's Medicaid number or, social security number
 - First and last name,
 - Date of birth
- Requires submission of data to support performance metrics.



HVS Timeline

Release Letter of Intent request for Community Health	
Pilots	May 10, 2017
Letters of Intent due from Lead Entities to DHMH	May 24, 2017at 5pm
HVS Pilot Application Published by DHMH	June 5, 2017
HVS Pilot Application Process Webinar	June 21, 2017
HVS Pilot Applications due to DHMH	July 19, 2017
Calls with applicants	
(Clarification & modification discussions)	July 24-27, 2017
HVS Pilot Award notifications	
(expected, pending final CMS approval)	August 28, 2017
HVS Pilots Begin	
(Based upon approved Pilot implementation plans)	Sept/Oct. 2017

Submission of Letter of Intent (LOI)

The purpose of the Letter of Intent is to:

- 1) assist <u>you</u> in thinking through and anticipating the basics of what DHMH expects in the forthcoming Request for Application
- 2) provide us with a sense of interest and readiness.
- 3) obtain preliminary Pilot design proposals
- 4) opportunity for interested parties to submit questions



Letter of Intent Template

- 1. Lead Entity Contact Information
- 2. Lead Entity Eligibility for Funding
- 3. Project Goal and Synopsis
- 4. Target Population and Geographic Area
- 5. Project Plan
- 6. Participating Entities
- 7. Budget
- 8. Questions



Opportunities for Technical Assistance

- Special Terms and Conditions
- FAQs
- Upcoming Webinar:
 - June 21st: HVS Pilot Application Process and Review of FAQs
- Dedicated mailbox
- DHMH Pilot Leads (Alex Loizias and Sandy Kick)



Community Health Pilot Materials and Resources

Community Health Pilots Landing Page

Letter of Intent Instructions

1115 Health Choice Waiver Special Terms and Conditions

-Evidence-Based Home Visiting Services Protocol

HVS Pilot Timeline



General Waiver Information

The 1115 HealthChoice Waiver Renewal resources are available here:

- https://mmcp.health.maryland.gov/Pages/1115-HealthChoice-Waiver-Renewal.aspx

Hard copies may be obtained by calling: (410) 767-1439.

For additional information or questions about the waiver, you may email dhmh.healthchoicerenewal@maryland.gov



Questions?

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